

PROCEDURES FOR EVALUATING PROGRAMS THAT APPLICANTS MAY SUBMIT AS SCIENCE-BASED, BUT WHICH ARE NOT ON MassCALL'S LISTS OF SCIENCE-BASED PROGRAMS

As stated in the RFR, applicants who do not wish to propose a science-based prevention strategy from the list of approved programs presented in Appendices A & C may propose an alternative program provided that MassCALL approves it as science-based prior to filing the application. To obtain this approval applicant must file *Susan, insert a number* copies of an approval application no later than Susan, insert a date* that contains at least the following:

- C A complete description (e.g., nature of the intervention, duration, and expected outcomes) of the proposed prevention strategy or strategies and of the group(s) being targeted (e.g., age, gender, socio-economic status, location, presence of risk and protective factors).
- C Evidence of the effectiveness of the proposed strategy (strategies) using rigorous evaluation methods (see below). This evidence may be a published or unpublished evaluation report, and must include a detailed description of the study procedures used to evaluate the strategy.

The documentation provided will be reviewed and evaluated by one or more experts in prevention research to be designated by MassCALL. These experts will determine whether the strategy does or does not qualify as science-based. The applicant will be notified of their decision approximately *two* weeks after the documentation is received. Applicants whose alternative prevention strategies are not judged to be science-based may still proceed to file an application for MassCALL funds using any of the prevention strategies on the approved list in Appendices A and C. Applicants whose alternative prevention strategy are judged to be science-based can proceed to file an application for MassCALL funds using their alternative strategy to meet the MassCALL requirement for use of science-based prevention strategies.

Documentation will be scored using methods and criteria similar to those used by CSAP to determine whether a prevention strategy was science-based (Brounstein, Zweig and Gardner, December 3, 1998, pp. 10-11). MassCALL's experts will score the study described in the documentation on the following criteria:

- C **Theory:** the degree to which the project findings are based on clear well-articulated theory, clearly stated hypotheses, and clear operational relevance.
- C **Fidelity of interventions:** the degree to which there is clear evidence of high fidelity implementation and dosage of the program was sufficient to affect positive change.
- C **Sampling strategy and implementation:** the quality of sampling design and implementation, and the strength of evidence concerning sample quality (e.g., data on attrition).

- C **Measures:** the operational relevance and psychometric quality of measure used in the evaluation, the quality of supporting evidence.
- C **Data collection:** the quality of implementation of data collection (e.g., amount of missing data)
- C **Analysis:** the appropriateness and technical adequacy of techniques of analysis, primarily statistical.
- C **Plausible threats to validity:** the degree to which the evaluation design and implementation addresses and eliminates plausible alternative hypotheses concerning program effects. The degree to which the study design and implementation warrants strong causal attributions concerning program effects.
- C **Integrity:** the overall, level of confidence that the reviewer can place in project findings based on research design and implementation.

Each criterion will be rated on a 5-point scale, with 1 being "very low" and 5 being "very high quality." The scores will be averaged for the 8 criteria. A strategy with an average score of 3 or greater will be categorized as science-based. A strategy with an average score below 3.0 will be categorized as not meeting MassCALL's requirements for a science-based prevention.